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Debtor 1 Shanique	N	Dent	Case number (if know	(N)			
First Name Pair 6: Answer These (Middle Name	Last Name					
	Questions for Reporting P		1.4.0				
16. What kind of debts do you have?	101(8) as "incurred No. Go to line 1 Yes. Go to line 16b. Are your debts pri	by an individual primes to be a final business de business or investment to business de business or investment to business	narily for a personal, fa bts? Business debts a ent or through the ope	are defined in 11 U.S.C. § amily, or household purpose." are debts that you incurred to ration of the business or or business debts.			
17. Are you filing under Chapter 7?	No. I am not filing under	Chapter 7. Go to line 18.					
Do you estimate tha after any exempt	xempt paid that funds will be available to distribute to unsecured creditors?						
property is excluded and administrative	d [] No.						
expenses are paid	II Yes.						
that funds will be							
available for distribution to							
unsecured creditors	?						
18. How many creditors	I 1-49	[] 1,000-	5,000	25,001-50,000			
do you estimate that	Service.	5,001-		50,001-100,000			
you owe?	100-199 200-999	[_] 10,001	-25,000	More than 100,000			
	☑ \$0-\$50,000	£4 000	004 640 78	[]			
19. How much do you estimate your assets	premy		,001-\$10 million 0,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion			
to be worth?	\$100,001-\$500,000	ANNUAL CONTRACTOR OF THE PARTY	0,001-\$100 million	\$10,000,000,001-\$10 billion			
	\$500,001-\$1 million	Americal	00,001-\$500 million	More than \$50 billion			
20. How much do you	Ø \$0-\$50,000	[] \$1,000	,001-\$10 million	\$500,000,001-\$1 billion			
estimate your	550,001-\$100,000		0,001-\$50 million	\$1,000,000,001-\$10 billion			
liabilities to be?	\$100,001-\$500,000	The beautiful Control of the Control	0,001-\$100 million	\$10,000,000,001-\$50 billion			
	\$500,001-\$1 million	[_] \$100,0	00,001-\$500 million	More than \$50 billion			
Part 74 Sign Below	Lhava examined this noti	tion and i dodos ur		Ale and the second seco			
For you	and correct.	don, and i deciate di	ider perialty or perjury	that the information provided is true			
	If I have chosen to file un 11,12, or 13 of title 11, Ur choose to proceed under	nited States Code. I u	aware that I may proc inderstand the relief a	eed, if eligible, under Chapter 7, vailable under each chapter, and I			
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
	I request relief in accorda	ance with the chapter	of title 11, United Stat	es Code, specified in this petition.			
	I understand making a fall	se statement, concea	iling property, or obtai	ining money or property by fraud in			
	years, or both. 18 U.S.C.	S§ 152, 1341, 1519,	n tines up to \$250,000 and 3571.), or imprisonment for up to 20			
	/s/ Shanique Dent	Sharing It	X Simulation	Delta			
	Signature of Debtor 1	2016	Signature of				
HE FANNS PER TENENYI MASHII PONNYYSI SIONAN PROONSE TUURUSA 11 - 12 - 14 - 14 - 14 - 14 - 14 - 14 -	Executed on 9/12/2 MM	2016 M / DD / YYYY	Executed	on			

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Fill in this infor	mation to identify your cas	C		
Debtor 1	Shanique	N	Dent	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				
	***************************************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
Official	Form 106De	C		Check if this is a amended filing
Declara	tion About a	– n Individual De	btor's Sched	ules 12/1
f two married	people are filing togethe	er, both are equally respons	ible for supplying correct	information.
money or prop §§ 152, 1341, 15	erty by fraud in connect 19, and 3571.	ile bankruptcy schedules or ion with a bankruptcy case	amended schedules. Ma can result in fines up to \$	king a false statement, concealing property, or obtaining 250,000, or imprisonment for up to 20 years, or both. 18 U.S.C.
Parkk Sign	Below			
Did you p	ay or agree to pay some	eone who is NOT an attorney	to help you fill out bank	ruptcy forms?
pulsons;		·	, -	• • • • • • • • • • • • • • • • • • • •
✓ No				
Yes.	Name of person		_ Attach Bankruptcy P Signature (Official Fo	etition Preparer's Notice, Declaration, and orm 119).
Under per	naity of perjury, I declare	that I have read the summa	ry and schedules filed w	th this declaration and
that they	are true and correct.	• 12		
🗶 /s/ Shani	que Dent	Man I	×	
Signature o	of Debtor 1		Signature	of Debtor 2
Date 9/12/	2016	D.	Date	
	/DD/YYYY		TO THE PARTY NAMED IN COLUMN TO THE PARTY NAM	/DD/YYYY

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Debtor 1	Shanique First Name	N Middle Name	Dent Last Name	Case number (# known)
28. Wii cre	thin 2 years before ye ditors, or other parti	ou filed for bankruptcy, did g es.	you give a financial state	nent to anyone about your business? Include all financial institutions,
Z	No Yes. Fill in the details	below.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street			
	ramor odor			
	City	State Zip Code	**************************************	
Part 12:	Sign Below			
true	and correct. I unders truptcy case can resu	stand that making a false stall in fines up to \$250,000, or handle bent seemed and the stall be a false stal	atement, concealing prop	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with a 10 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date
Did y	ou attach additional	pages to Your Statement o	f Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
Kanamak abansay	No Yes			
Did y	ou pay or agree to p	ay someone who is not an a	attorney to help you fill ou	t bankruptcy forms?
V	No			
E-	Yes, Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Dent, Shanique N	Case No	
	Debtor(s)	Case IVO.	
		Chapter. Chapter13	_
	VERIFICA	TION OF CREDITOR MATRIX	
	The above named Debtors hereby verify tha	t the attached list of creditors is true and correct to the best of their knowled	∍dge
Date:	9/12/2016	/s/ Dent, Shanique N Dent, Shanique N Signature of Debtor	

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Debto		Shanique	N	Dent	Case number (if known)	
477		First Name	Middle Name	Last Name		
		culate the median family		you. Follow these steps	S:	
	16a,	Fill in the state in which y	you live.	Illinois	_	
	16b.	Fill in the number of peop	ple in your household.	4	_	
	16c.	Fill in the median family in To find a list of applicable may also be available at	income for your state and e median income amount the bankruptcy clerk's offic	s, go online using the lin	k specified in the separate instructions for this form. This list	\$86,921.00
17.	How	v do the lines compare?	i			
	17a.	Line 15b is less than 11 U.S.C. § 1325(b)	n or equal to line 16c. On t (3). Go to Part 3. Do NO	he top of page 1 of this fo OT fill out <i>Calculation of t</i>	orm, check box 1, <i>Disposable income is not determined under</i> Disposable Income (Official Form 122C-2).	
	17b.	1325(b)(3). Go to F	in line 16c. On the top of p Part 3 and fill out Calcul income from line 14 abov	ation of Disposable In	box 2, Disposable income is determined under 11 U.S.C. § acome (Official Form 122C-2). On line 39 of that form, copy	
?art s	X (Calculate Your Com	mitment Period Un	der 11 U.S.C. §13	25(b)(4)	
	,	y your total average mo	•			\$826.09
19.	Ded com	uct the marital adjustm milment period under 11 U	ent if it applies. If you ar I.S.C. § 1325(b)(4) allows	re married, your spouse i you to deduct part of you	is not filing with you, and you contend that calculating the ir spouse's income, copy the amount from line 13.	
	19a.	If the marital adjustment	does not apply, fill in 0 on l	ine 19a.		- <u>\$0.00</u>
•	19b.	Subtract line 19a from	line 18.			\$826.09
20.	Calc	culate your current moni	thly income for the year	. Follow these steps:		
2	20a,	Copy line 19b.				\$826.09
		Multiply by 12 (the number	er of months in a year).			x 12
4	20b.	The result is your current	monthly income for the y	ear for this part of the for	m.	\$9,913.08
Ž	20c.	Copy the median family in	ncome for your state and s	size of household from lin	ne 16c.	\$86,921.00
21. 1	How	do the lines compare?				
and a	∑	Line 20b is less than line 2 period is 3 years. Go to Pa	Oc. Unless otherwise orde art 4.	ered by the court, on the	top of page 1 of this form, check box 3, The commitment	
		Line 20b is more than or e commitment period is 5 yea		herwise ordered by the o	court, on the top of page 1 of this form, check box 4, The	
art 4	S	Sign Below				
	ı	By signing here, I declare	under penalty of penury th	nat the information on this	s statement and in any attachments is true and correct.	
			V/			
		/s/ Shanique Dent Signature of Debtor 1		s s	Signature of Debtor 2	
		·			enginated on Doblot 2	
		Date 9/12/2016 MM/DD/YYYY	,		Date	

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

Shanique N Dent		Case No.	
Debtor		**************************************	(If known)
		Chapter	Chapter 13
DISCLOSURE OF CO	MPENSATION C	OF ATTORNEY FO	OR DEBTOR
Pursuant to 11 U.S.C. § 329(a) and Fed. that compensation paid to me within one	Bankr. P. 2016(b), I certif	y that I am the attorney for the	ne abovenamed debtor(s) and
For legal services, I have agreed to acco	ept		\$4,000.00
Prior to the filing of this statement I hav	e received		\$350.00
Balance Due			\$3,650.00
The source of the compensation paid to	me was:		
Debtor	Other (specify)		
The source of the compensation paid to	me is:		
Z Debtor	Other (specify)		
I have not agreed to share the above members and associates of my law	e-disclosed compensation firm.	with any other person unless	they are
members or associates of my law fire	rm. A copy of the agreeme	a other person or persons whent, together with a list of the	no are not names of
In return for the above-disclosed fee, I h a. Analysis of the debtor's financial s bankruptcy;	ave agreed to render lega situation, and rendering ad	I service for all aspects of the vice to the debtor in determin	e bankruptcy case, including: ning whether to file a petition in
b. Preparation and filing of any petit	ion, schedules, statement	s of affairs and plan which ma	ay be required;
c. Representation of the debtor at th	e meeting of creditors and	confirmation hearing, and ar	ny adjourned hearings thereof;
d. Representation of the debtor in a	dversary proceedings and	other contested bankruptcy r	matters;
By agreement with the debtor(s), the abo	ve-disclosed fee does not	include the following service	s:
## HIPTORIAN	CERTIFICATION	N	
certify that the foregoing is a complete st e debtor(s) in this bankruptcy proceedings	atement of any agreemens.	it or arrangement for paymen	at to me for representation
9/12/2016		/s/ Ryan Crotty	
Date		Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	
	Disclosure of Co Pursuant to 11 U.S.C. § 329(a) and Fed. that compensation paid to me within one services rendered or to be rendered on his as follows: For legal services, I have agreed to according to the filling of this statement I have Balance Due The source of the compensation paid to Debtor The source of the compensation paid to Debtor The source of the compensation paid to Debtor I have not agreed to share the above members and associates of my law find the people sharing in the compensation in return for the above-disclosed fee, I has Analysis of the debtor's financial shankruptcy; b. Preparation and filling of any petitic. Representation of the debtor at the d. Representation of the debtor in according to the debtor of the debtor of the debtor in the debtor of	Disclosure of compensation of that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in compensation paid to me was services. I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify) The source of the compensation paid to me is: Debtor Other (specify) I have not agreed to share the above-disclosed compensation with members and associates of my law firm. I have agreed to share the above-disclosed compensation with members or associates of my law firm. A copy of the agreement the people sharing in the compensation, is attached. In return for the above-disclosed fee, I have agreed to render legal a. Analysis of the debtor's financial situation, and rendering accompany by the debtor's financial situation, and rendering accompany by the debtor of the debtor at the meeting of creditors and d. Representation of the debtor at the meeting of creditors and d. Representation of the debtor in adversary proceedings and By agreement with the debtor(s), the above-disclosed fee does not certify that the foregoing is a complete statement of any agreement adottor, in this bankruptcy proceedings. (CERTIFICATION)	Disclosure of compensation paid to me within one year before the filing of the petition in bankruptcy, or a services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connect is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify) The source of the compensation paid to me is: Debtor Other (specify) I have not agreed to share the above-disclosed compensation with any other person unless members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons when members or associates of my law firm. A copy of the agreement, together with a list of the the people sharing in the compensation, is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determine bankruptcy; b. Preparation and filling of any petition, schedules, statements of affairs and plan which made the people sharing in the debtor at the meeting of creditors and confirmation hearing, and are d. Representation of the debtor in adversary proceedings and other contested bankruptcy in the debtor of the debtor of the debtor of any agreement or arrangement for paymers elebtor(s) in this bankruptcy proceedings. **CERTIFICATION** CERTIFICATION** CERTIFICATION** CERTIFICATION* CERTIFICATION* Certify that the foregoing is a complete statement of any agreement or arrangement for paymers elebtor(s) in this bankruptcy proceedings. **Signature of Attorney** Signature of Attorney** Semiad Law Firm



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 61.76 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Signed:

Shanique N Dent

Debtor(s)

Do not sign this agreement if the amounts are blank.

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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u></u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Shanique	
Write the name that is on your government-issued	First name	First name
	N	
picture identification (for	Middle name	Middle name
example, your driver's	Dent	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX- <u>8624</u>	xxx - xx-
Social Security number or federal	OR	OR
Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

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De	ebtor 1 Shanique	N	Dent	_ Case number (if	known)	
	First Name	Middle Name	Last Name			
		About Debtor 1:		About Del	btor 2 (Spouse Only	y in a Joint Case):
4.	Any business names and Employer	I have not used any busine	ess names or EINs.	☐ I have r	I have not used any business names or EINs.	
	Identification Numbers (EIN) you have used in the	Business name		Business name		
	last 8 years	Business name	Business name			
	Include trade names and doing business as names	EIN	EIN	EIN		
		EIN		EIN		
5.	Where you live			If Debtor 2	lives at a different addr	ress:
		7805 S Burnham Ave FI 2				
		Number Street		Number	Street	
		Chicago Illinois	60649			
		City State	Zip Code	City	State	Zip Code
		Cook		. <u> </u>		
		County		County		
		If your mailing address is diff fill it in here. Note that the cour this mailing address.			mailing address is differ that the court will send an	
		Number Street		Number	Street	
		City State	Zip Code	City	State	Zip Code
6.	Why you are choosing this	Check one:		Check one:		
	district to file for bankruptcy	Over the last 180 days bef lived in this district longer	ore filing this petition, I have than in any other district.		e last 180 days before filin this district longer than in	
		I have another reason. Exp	olain. (See 28 U.S.C. §§ 1408.)	I have a	another reason. Explain. (S	See 28 U.S.C. §§ 1408.)
				-		
				-		
				-		

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Debtor 1 Shanique	N		Case number (if know	n)	
First Name	Middle Name	Last Name			
Part 2: Tell the Court Ab	oout Your Bankruptcy C	ase			
7. The chapter of the Bankruptcy Code you are choosing to file under		iption of each, see <i>Notice Required</i> in page 1 and check the appropriate bo		(b) for Individuals Filing for Bankruptcy (Form	
8. How you will pay the fee	 ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 				
9. Have you filed for bankruptcy within the last 8 years?	No. Yes. District District District	WhenWhenWhen	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number	
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	V No. Yes. Debtor District Debtor District	When When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known	
11. Do you rent your residence?	✓ No. Go to line Yes. Fill out I	obtained an eviction judgment against e 12. Initial Statement About an Eviction Jud Kruptcy petition.			

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Debtor 1 Shanique		N		Dent	Case number (if known)		
First Name				Last Name			
Part 3: Report About An	y Bus	sinesse	es You Own as a S	Sole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole		No. Yes.	Go to Part 4. Name and location of both statements of business, if an analysis of business, if an analysis of business and business are considered to business. The statements of business are considered to business and business are considered to business. The statements of business are considered to business and business are considered to business.	Street	itate business:	Zip Code	
proprietorship, use a separate sheet and attach it to this petition.			Single Asset Re Stockbroker (as	eal Estate (as defined defined in 11 U.S.C. ker (as defined in 11 U	- ', ',		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure mall U.S.C. § 11 16(1)(B).					of	
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	Bankruptcy Code.	er 11, but I am NOT a	a small business debtor accord	ing to the definition in the	Code.
Part 4: Report if You Ow	n or l	Have A	Any Hazardous Pro	operty or Any P	roperty That Needs Imn	nediate Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard			What is the hazard? If immediate attention is a	needed, why is it need	ded?		
to public health or safety? Or do you own any property that needs immediate attention?		,	Where is the property?	Number	Street		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zip Code	

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Debtor 1 Shanique N Dent Case number (if known)

First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the

internet, even after I reasonably tried

I am currently on active military duty in

a military combat zone.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

Active duty.

credit counseling with the court.

internet, even after I reasonably tried

I am currently on active military duty in

a military combat zone.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

Active duty.

credit counseling with the court.

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Debtor 1 Shanique		Dent Case number (if known	1)				
Part 6: Answer These Qu	uestions for Reporting Purpo						
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	te that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? Cluded ative paid Yes.						
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000				
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below							
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** //s/ Shanique Dent Signature of Debtor 1 Executed on						

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Debtor 1 Shanique	N	Dent	Case number ((if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not represented by an attorney, you do not	eligibility to proceed up the relief available und to the debtor(s) the no certify that I have no ke petition is incorrect.	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, U which the person is 6 .S.C. § 342(b) and, in	hat I have informed the debtor(s) about nited States Code, and have explained eligible. I also certify that I have delivered n a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
need to file this page.	/s/ Ryan Crotty		Date	9/15/2016
	Signature of Attorney	for Debtor	Date	MM / DD / YYYY
	Ryan P Crotty Printed name Semrad Law Firm Firm name 20 S. Clark Street Street 28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3128374032	Email address	rcrotty@semradlaw.com
	6312602		Illing	pis
	Bar number		State	e

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Fill in this inform	nation to identify your cas	e:		
Debtor 1	Shanique	N	Dent	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	Northern	District of Illinois	
Case number (If known)			(State)	

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$14,825.00
1c. Copy line 63, Total of all property on Schedule A/B	\$14,825.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$1,500.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$32,185.02
Your total liabilities	\$33,685.02
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,374.30
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,199.00

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Debt	tor 1 Shaniqu		N	Dent	Case n	umber (if known)		
	First Nam		Middle Name	Last Name				
Part	4: Answe	r These Questions	for Administi	rative and Statistical	Records			
6. A ı	re you filing t	for bankruptcy under C	chapters 7, 11, or	13?				
	No. You ha	ave nothing to report on the	his part of the form	. Check this box and submi	this form to the co	ourt with your other schedul	es.	
Ŀ	✓ Yes.							
7. W	hat kind of o	debt do you have?						
[mer debts are those incurre out lines 8-10 for statistical				
		ts are not primarily con the court with your othe		u have nothing to report on	this part of the form	n. Check this box and subm	it	
		ntement of Your Currer Line 11; OR, Form 122B	•	ne: Copy your total current of 122C-1 Line 14.	monthly income fro	m Official	\$826.09	
9.	Copy the fo	llowing special categor	ries of claims fro	m Part 4, line 6 of Schedu	ıle E/F:			
	From Part 4	on Schedule E/F, copy	the following:			Total claim		
	9a. Domestic	support obligations (Co	py line 6a.)			\$0.00		
	9b. Taxes an	d certain other debts you	owe the governme	ent. (Copy line 6b.)		\$0.00		
	9c. Claims fo	or death or personal injury	while you were in	toxicated. (Copy line 6c.)		\$0.00		
	9d. Student l	oans. (Copy line 6f.)				\$0.00		
	•		ation agreement or	divorce that you did not re	oort as	\$0.00		
		s. (Copy line 6g.)	nlane, and other s	imilar debts. (Copy line 6h.)		\$0.00		
			piaris, ariu otrier s	пппа чевіз. (Сору ппе біт.				
	un intal Ad	nd lings ag through af				00.00		

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Fill in this inf	formation to identify your case	e:					
Debtor 1	Shanique	N		Dent			
	First Name	Middle N	lame	Last Name	<u>-</u> '		
Debtor 2					_		
Spouse, if fi	iling) First Name	Middle N	lame	Last Name			
Inited State	s Bankruptcy Court for the:	Northern		District of Illinois			
				(State)			
ase numbe known)	er				-		
)fficial	Form 106A/B						Check if this is an amended filing
ched	ule A/B: Prope	ertv					12
1. Do you o			·	Other Real Estate You nce, building, land, or simila			
	es. Where is the property?						
1.1 <u> </u>	itreet address, if available, or	other description	Single-f	e property? Check all that ap	oply.	the amount of any secure	claims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property
_			Condor	or multi-unit building minium or cooperative actured or mobile home		Current value of the entire property?	Current value of the portion you own?
			Land	lotated of mobile nome			
N	lumber Street			nent property		Describe the nature of	
_			Timesh Other	are		interest (such as fee si the entireties, or a life	
C	City State	Zip Code					
			one.	an interest in the property?	Check	(see instructions)	mmunity property
			☐ Debtor	,			
			Debtor	2 only 1 and Debtor 2 only			
				one of the debtors and another	er		
				rmation you wish to add ab		item such as local	
				dentification number:	out this	nem, such as local	

If you own or have more than one, list here:

Street address, if available, or other description

1.2

			Manufactured or mobile home
			_
Number	Street		Investment property
			Timeshare
City	State	Zip Code	Other
			Who has an interest in the property? Check
			one. Debtor 1 only
			Debtor 2 only

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the

entire property? portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Current value of the

Check if this is community property (see instructions)

Debtor 2 only

Debtor 1 and Debtor 2 only

Single-family home

At least one of the debtors and another

What is the property? Check all that apply.

Duplex or multi-unit building

Condominium or cooperative

Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Shanique First Name	N Middle Name	Dent Last Name	Case numbe	r (if known)	
1.3 Stre	et address, if available, or ot	ner description	What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	•
Num City		Zip Code	Land Investment property Timeshare Other	_	Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
			Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Other information you wish to add a	ner	Check if this is con (see instructions)	mmunity property
			property identification number: all of your entries from Part 1, includere			
Do you ov you own th	at someone else drives. If young, trucks, tractors, sport util	equitable interest u lease a vehicle, a	t in any vehicles, whether they are regalso report it on Schedule G: Executory C cycles			
3.1	Make Model:	Mercury Grand Marquis	Who has an interest in the propone. Debtor 1 only	erty? Check	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: aims Secured by Property.
	Year: Approximate mileage: Other information: 1999 Mercury Grand Marqu	1999 	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions)		Current value of the entire property? \$1375.00	Current value of the portion you own? \$1375.00
3.2	Make Model: Year:		Who has an interest in the propone. Debtor 1 only	erty? Check	the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions)		Current value of the entire property?	Current value of the portion you own?

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	Shanique	N	Dent	Case number	(if known)	
	First Name	Middle Name	Last Name			
3.3	Make		Who has an interest in the p	roperty? Check	Do not deduct secured c	•
	Model:		one.		•	ed claims on Schedule D:
	Year:		Debtor 1 only		Creditors who have Cia	nims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors a	nd another		
			Check if this is communit instructions)	y property (see		
3.4	Make Model:		Who has an interest in the pone.	roperty? Check	Do not deduct secured of	laims or exemptions. Put ed claims on <i>Schedule D</i> :
	Year:		Debtor 1 only		•	nims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		Current value of the entire property?	portion you own?
			At least one of the debtors a	nd another		
			Check if this is communitions instructions)	y property (see		
	Yes					
4.1	Make		Who has an interest in the p	roperty? Check		laims or exemptions. Put
	Model:		one.			ed claims on Schedule D:
	Year: Approximate mileage:		Debtor 1 only		Creditors who have Cia	nims Secured by Property.
	Approximate mileage.		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	
			At least one of the debtors a	nd another		portion you own?
				ila ariotriei		
			Check if this is communit instructions)			
4.2	Make			ty property (see	Do not deduct secured of	
4.2	Make Model:		instructions)	ty property (see	the amount of any secure	portion you own? laims or exemptions. Put ed claims on Schedule D:
4.2	Model: Year:		instructions) Who has an interest in the property of the prop	ty property (see	the amount of any secure	portion you own?
4.2	Model:		instructions) Who has an interest in the pone.	ty property (see	the amount of any secure	portion you own? laims or exemptions. Put ed claims on Schedule D:
4.2	Model: Year:		instructions) Who has an interest in the prone. Debtor 1 only	ty property (see	the amount of any secure Creditors Who Have Cla	portion you own? laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
4.2	Model: Year: Approximate mileage:		instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only	ry property (see	the amount of any secure Creditors Who Have Cla Current value of the	portion you own? laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the
4.2	Model: Year: Approximate mileage:		instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ry property (see	the amount of any secure Creditors Who Have Cla Current value of the	portion you own? laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the

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Dent Debtor 1 Shanique Case number (if known) First Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture and Household Goods \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used Home Electronics and Cell Phone \$700.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... **Used Clothing** \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □l No Yes. Describe... **Used Costume Jewelry** \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1450.00 for Part 3. Write that number here

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Der	Tiret Name	Middle Name	Leat Name	
Part	First Name 4: Describe Your	Financial Assets	Last Name	
			terest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash			·
	☑ No		safe deposit box, and on hand when you file your petition	
			Cash:	
17.			s; certificates of deposit; shares in credit unions, brokerage houses, counts with the same institution, list each.	
	Yes		Institution name:	
		17.1. Checking account:		
		17.2. Checking account:		
		17.3. Savings account:		
		17.4. Savings account:		
		17.5. Certificates of deposit:		
		17.6. Other financial account:		
		17.7. Other financial account:		
		17.8. Other financial account:		
		17.9. Other financial account:		- ,
18.		, or publicly traded stocks		-
	Examples: Bond funds, No	investment accounts with brokerag	ge firms, money market accounts	
	Yes	Institution or issuer name:		
	_			
19.	an LLC, partnership,		ated and unincorporated businesses, including an interest in	
	✓ No	Name of entity	% of ownership:	
	Yes. Give specific information about		· 	
	them			

Official Form 106A/B Schedule A/B: Property page 5

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Deb	tor 1	Shanique	N	Dent	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg Nor	gotiable instruments ir	orate bonds and other negotian clude personal checks, cashiers are those you cannot transfer	checks, promissory note	s, and money orders.	
		Yes. Give specific information about them	Issuer name:			
21.		irement or pension imples: Interests in IR), thrift savings accounts,	or other pension or profit-sharing plans	
	✓	No				
		Yes. List each account	Type of account: 401(k) or similar plan:	Institution name:		
		separately.	Pension plan:			
			IRA:			
			Retirement account:			'
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa	imples: Agreements v npanies, or others	orepayments deposits you have made so that you with landlords, prepaid rent, publi			
		No		moulduom name.		
		Yes	Electric: Gas:			
			Heating oil:			•
			Security deposit on rental unit:			
			Prepaid rent:			·
			Telephone:			·
			Water:			
			Rented furniture:			·
			Other:			·
23.		•	a periodic payment of money to	you, either for life or for a ı	number of years)	
		No Yes	Issuer name and description:			

Official Form 106A/B Schedule A/B: Property page 6

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Debte	or 1 Shanique First Name	N Middle	Namo	Dent Last Name	Case number (if known)	
24.	Interests in a		count in a qualified		a qualified state tuition program	•
	26 U.S.C. 99 5	30(b)(1), 329A(b), and 329(D)(1).			
	Yes	Institution name and descrip	otion. Separately file th	e records of any interests.1	1 U.S.C. § 521(c):	
					<u> </u>	
25.	exercisable fo	able or future interests in or your benefit	property (otner tnan	anything listed in line 1), and rights or powers	
	✓ No Yes. Desc	rihe				1
	100. 2000					
26.		rights, trademarks, trade rnet domain names, website	•		ents	
	, ✓ No	,	,	0 0		
	Yes. Desc	ribe				
27.		nchises, and other genera				
		ding permits, exclusive licer	nses, cooperative asso	ociation holdings, liquor lice	enses, professional licenses	
	✓ No Yes. Desc	ribe				
Mon	ey or prope	erty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or prope Tax refunds ov					portion you own? Do not deduct secured
	Tax refunds ov	wed to you			Federal:	portion you own? Do not deduct secured
	Tax refunds ov ✓ No ☐ Yes. Give s about	wed to you specific information them, including whether			Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov ✓ No ☐ Yes. Give s about you a	wed to you specific information				portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds ov No Yes. Give s about you a and th	ppecific information them, including whether laready filed the returns the tax years	pousal support, child si	upport, maintenance, divorc	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and th	ppecific information them, including whether laready filed the returns the tax years	pousal support, child si	upport, maintenance, divord	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and tr Family suppor Examples: Past	ppecific information them, including whether laready filed the returns the tax years			State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and tr Family suppor Examples: Past	specific information them, including whether lready filed the returns te tax years t due or lump sum alimony, sp	pousal support, child so Back Owed Child Su		State: Local: ce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and tr Family suppor Examples: Past	specific information them, including whether lready filed the returns te tax years t due or lump sum alimony, sp			State: Local: ce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds ov No Yes. Give s about you a and tr Family suppor Examples: Past	specific information them, including whether lready filed the returns te tax years t due or lump sum alimony, sp			State: Local: Ce settlement, property settlement Alimony: Maintenance:	\$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ☐ No ✓ Yes. Give s	specific information them, including whether lready filed the returns te tax years the due or lump sum alimony, specific information			State: Local: Ce settlement, property settlement Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$10000.00
28. 29.	Tax refunds ov ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ☐ No ✓ Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, specific information	Back Owed Child Su	pport benefits, sick pay, vacation	State: Local: Ce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$10000.00 \$0.00
28. 29.	Tax refunds ov ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ☐ No ✓ Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, specific information	Back Owed Child Su	pport benefits, sick pay, vacation	State: Local: Ce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$10000.00 \$0.00
28. 29.	Tax refunds ov ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ☐ No ✓ Yes. Give s Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns te tax years t due or lump sum alimony, specific information	Back Owed Child Su	pport benefits, sick pay, vacation	State: Local: Ce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$10000.00 \$0.00

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Deb	tor '	1 Shanique	N	Dent	Case number (if known)	
		First Name	Middle Name	Last Name		
31.		terests in insurance		Ith savings account (HSA); credit, h	omeowner's, or renter's insurance	
		tarriproo. 1 Toditi i, diodi	sinty, or mo modramos, mod	ian savings associate (inexty, oreals, in	omeowners, or remore incurance	
		No Yes. Name the insu	rance company	Company name:	Beneficiary:	Surrender or refund value:
		of each policy and I	list its value			
32.	Ar	ny interest in proper	ty that is due you from s	someone who has died		-
		you are the beneficiar operty because some		roceeds from a life insurance policy,	or are currently entitled to receive	
	✓	' No				
		Yes. Describe				
33.				ou have filed a lawsuit or made a	demand for payment	
	Ex	<i>camples:</i> Accidents, er	mployment disputes, insur	ance claims, or rights to sue		
		No				
	✓	Yes. Describe	Judgement award from pr	operty damage		
		\$2000.00				
34.			unliquidated claims of	every nature, including countered	claims of the debtor and rights	
	¥	'] No				
	_	Yes. Describe				
05	•					
35.	Ar	ny financiai assets y ■	ou did not already list			
	¥	No				
	L	Yes. Describe				
26	۸۵	dd the deller velue a	of all of vour optrion from	n Part 4, including any entries for	r pages you have attached	
30.			· ·	4, including any entries for	. •	\$12000.00
Part	5:	Describe Any	Business-Related P	roperty You Own or Have a	an Interest In. List any real estate	in Part 1.
37.	Do	o you own or have a	ny legal or equitable into	erest in any business-related pro	perty?	
	✓	No. Go to Part 6.				Current value of the
		Yes. Go to line 38.			j	ortion you own? On not deduct secured claims or exemptions
38.	Ac	ccounts receivable o	or commissions you alrea	ady earned		
	V	No				
	Ė	Yes. Describe				
		-				
20	<u></u>	ffice continuous for	nichings and supplies			
39.		• •	nishings, and supplies ated computers, software,	modems, printers, copiers, fax mac	hines, rugs, telephones, desks, chairs, electro	nic devices
	V	· No	•	•		
	Ė	Yes. Describe				
	_					

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Deb	tor 1 Shanique First Name	N Middle Name	Dent Last Name	Case number (if known)	
40.		quipment, supplies you use in		our trade	
	✓ No	1. P. 1. 3. 1. P. 1. 1. 3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
	Yes. Describe				
	_				
41.	Inventory				
	₩ No				
	Yes. Describe				
	Too. Becombe				
42	Interests in partnersh	nine or joint vontures			
42.	No No	iips or joint ventures			
		Name	e of entity:	% of ownership:	
	Yes. Give specific information about				
	them				
				-	<u> </u>
13 (Customer lists mailing	lists, or other compilations			
45. (insts, or other complications			
	✓ No Voc Do your lists in	nclude personally identifiable info	rmation (as defined in 11 L	ISC 8 101//11 A \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Tes. Do your lists if	icidde personally identifiable iffic	imation (as defined in 11 c	5.5.6. § 101(41 <i>A))</i> :	
	☐ No				
	Yes. Desc	ribe			
44.	Any business-related	property you did not already li	st		
	✓ No				
	Yes. Give specific				
	information				
45. A	dd the dollar value of a	all of your entries from Part 5,	including any entries for	pages you have attached	
for P	art 5. Write that numbe	r here		>	
Part		Farm- and Commercial F in interest in farmland, list it in Par		oerty You Own or Have an Interest	In.
46.	Do you own or have a	any legal or equitable interest	in any farm- or commerc	ial fishing-related property?	
	No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47.				Do not deduct secured
					claims or exemptions
47.	Farm animals				or evertibilions
	Examples: Livestock, po	oultry, farm-raised fish			
	✓ No				
	Yes. Describe				
	-				

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Deb	tor 1	Shanique	N Middle Nesse	Dent	Case number (if known)	
10	Cro	First Name ps-either growing	Middle Name	Last Name		
48.	_		or narvesteu			
	뇓	No Vaa Daaariba				
	ш	Yes. Describe				
		L			·	
49.	Far	m and fishing equi	pment, implements, machiner	y, fixtures, and tools of trade		
	✓	No				
		Yes. Describe				
		L				
50.	Far	m and fishing supp	lies, chemicals, and feed			
	 	No				
	Ħ	Yes. Describe				
51.	Δnv	farm- and comme	 rcial fishing-related property y	ou did not already list		
•	I	No	, oran norming rounds property y			
	H	Yes. Describe				
		red. Dedonibe				
					Г	
			I of your entries from Part 6, in			
for P	art 6.	Write that number	here		>	
Part			operty You Own or Have		Did Not List Above	
53.			perty of any kind you did not a s, country club membership	iready list?		
	✓	No				1
	П	Yes. Give specific				
		information				
54. A	dd th	ne dollar value of al	I of your entries from Part 7. W	/rite that number here	·····	
Part	8:	List the Totals	of Each Part of this Forn	n		
55 F	Part 1	l · Total real estate	line 2		•	
00.	u	rotarroar ootato,			······································	
56. p	oart 2	2 total vehicles, line	: 5	\$1375.00	_	
57. P	art 3	: Total personal an	d household items, line 15	\$1450.00	_	
58. P	art 4	: Total financial ass	sets, line 36	\$12000.00	_	
59. F	Part !	5: Total business-re	elated property, line 45	ψ12000.00	_	
60. F	Part (6: Total farm- and fi	ishing-related property, line 52	2	_	
			erty not listed, line 54	<u></u>	_	
					_	
0∠. I	otal	personal property.	Add lines 56 through 61	\$14825.00		
					 Copy personal property total ► 	+ \$14825.00
					Copy personal property total ▶	
63 T	otal	of all property on S	chedule A/B. Add line 55 + line	62		+ \$14825.00

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Fill in this information to identify your case:						
Debtor 1	Shanique First Name	N Middle Name	Dent Last Name			
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)	r		(Otalo)			

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)					
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
		Copy the value from Schedule A/B					
	Brief description: Mercury , Grand	\$1,375.00	\$0	735 ILCS 5/12-1001(c)			
	Marquis, 1999, 1999 Mercury Grand Marquis		100% of fair market value, up to any applicable statutory limit				
	Line from Schedule A/B: 03						
	Brief description:	\$250.00	\$250.00	735 ILCS 5/12-1001(a)			
	Used Clothing		100% of fair market value, up to any	-			
	Schedule A/B: 11		applicable statutory limit				
3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)						
	No	and have the account of the second	Lind Odfi da sa kafana a sa fila kikin ana O				
	No	ed by the exemption with	hin 1,215 days before you filed this case?				
Yes							

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Debtor 1 Shanique Dent Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$400.00 **✓** description: \$400.00 **Used Furniture and** 100% of fair market value, up to any **Household Goods** applicable statutory limit Line from Schedule A/B: 06 Brief 735 ILCS 5/12-1001(b) \$700.00 **✓** description: \$700.00 **Used Home Electronics** 100% of fair market value, up to any and Cell Phone applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(g)(4) Brief \$10,000.00 **✓** description: \$10,000.00 **Back Owed Child** 100% of fair market value, up to any Support applicable statutory limit Line from Schedule A/B: 29 Brief 735 ILCS 5/12-1001(b) \$100.00 **V** description: \$100.00 **Used Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$2,000.00 description: **✓** \$2,000.00 Judgement award from 100% of fair market value, up to any property damage applicable statutory limit Line from

Schedule A/B:

33

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				_		
Fill in this info	rmation to identify your case	9:				
Debtor 1	Shanique	N	Dent			
	First Name	Middle Name	Last Name			
Debtor 2	ng) First Name	M. I.H. M	LastNassa			
(Spouse, ii iiii	119) FIRST Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	_ District of Illinois			
Case number (If known)			(State)			
Official	Form 106D			I		Check if this is an
Sched	ule D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	perty	12/1
space is need	-		are filing together, both are equal e entries, and attach it to this forn	•		
1. Do any	creditors have claims secu	red by your property?				
No.	Check this box and submit to	his form to the court with you	ur other schedules. You have nothing	else to report on this f	orm.	
✓ Yes.	. Fill in all of the information	below.				
Part 1: Lis	t All Secured Claims					
2. List all	secured claims. If a credito	or has more than one secure	ed claim, list the creditor separately	Column A	Column B	Column C
for each		editor has a particular claim,	list the other creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Creditor	st Title Loans- Pulaski r's Name	Describe the property t	hat secures the claim:	\$1,500.00	\$1,375.00	\$125.00
<u>3751 V</u> Num	V 79th St nber Street	Title Loan As of the date you file,	the claim is: Check all that apply.			
Chicac	o Illinois 60652	Contingent				
City	State ZIP Code	Unliquidated				
	wes the debt? Check one. ebtor 1 only	Disputed				
	ebtor 2 only	Nature of lien. Check al	I that apply.			
	ebtor 1 and Debtor 2 only	✓ An agreement you m car loan)	nade (such as mortgage or secured			
	least one of the debtors and other	Statutory lien (such a	as tax lien, mechanic's lien)			
	otner neck if this claim relates	Judgment lien from a	a lawsuit			
l to	a community debt	Other (including a rig	ght to offset)			
incurre		Last 4 digits of accour	nt number			
	Add the dollar value of	your entries in Column A	on this page. Write that	\$1,500.00		

number here:

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					_			
Fill	in this inform	ation to identify your cas	e:					
Deb	otor 1	Shanique	N	Dent				
		First Name	Middle Name	Last Name				
	otor 2	E'm (No m)	NAC JULIA NI a se a	LastNava				
(Spi	buse, ii iiiing	First Name	Middle Name	Last Name				
Unit	ted States Ba	ankruptcy Court for the:	Northern	District of Illinois				
Cas	se number			(State)				
	nown)							
Of	ficial F	orm 106E/F				Che	eck if this is ar	n amended filing
9	hodu	lo E/E: Cro	ditore Who	Have Unsecure	d Claims			
<u> </u>	, neuu	ie E/F. Cre	cultors vviio	nave Unsecure	u Ciaiiiis			12/15
party 106A that	/ to any exe /B) and on are listed in es in the bo	cutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases that could y Contracts and Unexpire s Who Hold Claims Secui	rs with PRIORITY claims and Pa result in a claim. Also list execut d Leases (Official Form 106G). D red by Property. If more space is this page. On the top of any ad	ory contracts on <i>Sch</i> o not include any cre needed, copy the Pa	nedule A/B: editors with art you nee	Property (Of partially sec d, fill it out, n	fficial Form cured claims number the
Par	List A	All of Your PRIORIT	ΓΥ Unsecured Claims	3				
1.	Do any cre	editors have priority un	secured claims against ye	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, ident much as po Continuation	ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	ore than one priority unsecured cla and nonpriority amounts, list that cla to the creditor's name. If you have particular claim, list the other credito or this form in the instruction booklet	im here and show both more than two priority rs in Part 3.	n priority and	nonpriority ar	mounts. As
						Total	Priority	Nonpriority

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Debt		nt Case number (if known) t Name						
Part:								
3.								
	✓ Yes.							
	unsecured claim, list the creditor separately for each claim. For each	I order of the creditor who holds each claim. If a creditor has more to claim listed, identify what type of claim it is. Do not list claims already in rs in Part 3. If you have more than four priority unsecured claims fill out to	cluded in Part 1.					
			Total claim					
4.1	City of Chicago Parking	Last 4 digits of account number	\$3,852.02					
	Nonpriority Creditor's Name 121 N. LaSalle St # 107A	When was the debt incurred?						
	Number Street	<u></u>						
		As of the date you file, the claim is: Check all that apply. Contingent						
	ChicagoIllinois60602CityStateZip Code	Unliquidated						
	Who incurred the debt? Check one.	Disputed						
	Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar						
	Is the claim subject to offset?	debts ✓ Other. Specify Parking Tickets						
	✓ No ☐ Yes							
4.2	ComEd	Last 4 digits of account number	\$3,000.00					
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?						
	Number Street	As of the date you file, the claim is: Check all that apply.						
	Bankruptcy Section	Contingent						
	Oakbrook Terrace Illinois 60181 City State Zip Code	Unliquidated						
	Who incurred the debt? Check one.	Disputed						
	Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts						
	Is the claim subject to offset?	✓ Other. Specify Electric Bill						
	Yes							
4.3	Enterprise Rent-A-Car Damage Recovery Unit Nonpriority Creditor's Name	Last 4 digits of account number	\$17,000.00					
	Po Box 801988 Number Street	When was the debt incurred?n/a						
	Number Street	As of the date you file, the claim is: Check all that apply.						
	Kansas City Missouri 64180	Contingent						
	City State Zip Code Who incurred the debt? Check one.	Unliquidated						
	Debtor 1 only	Disputed Type of NONERIORITY unsecured claim:						
	Debtor 2 only	Type of NONPRIORITY unsecured claim:						
	Debtor 1 and Debtor 2 only	Student loans Obligations arising out of a separation paragraph or divorce						
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts						
	Is the claim subject to offset?	✓ Other. Specify Debt						
	Yes							

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Debto	r 1 Shanique N	Dent Case number (if known)	
	First Name Middle Name	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Co	ontinuation Page	
	After listing any entries on this page, number them begin	nning with 4.5, followed by 4.6, and so forth.	Total claim
4.4	IDES	Last 4 digits of account number	\$2,000.00
	Nonpriority Creditor's Name 33 S. State St. Rm 1029	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
		—	
	ChicagoIllinois60603CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify Overpayment of Benefits	
	✓ No		
	Yes		
4.5	Illinois Tollway	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name 2700 Ogden Ave	When was the debt incurred?	
	Number Street		
	Legal Dept	As of the date you file, the claim is: Check all that apply.	
	Downers Grove Illinois 60515	Contingent	
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Tollway Tickets	
	✓ No		
	Yes		
4.6	Peoples Gas Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00
	200 E. Randolph	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	ChicagoIllinois60601CityStateZip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	✓ Other. Specify Gas Bill	

Yes

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Dent Debtor 1 Shanique Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Speedy Cash (Corporate Office) \$5.00 Last 4 digits of account number Nonpriority Creditor's Name 3527 N Ridge Rd When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Wichita 67205 Kansas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ Notice Only **✓** No Yes SW CRDT SYS 4.8 \$1,378.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2629 DICKERSON PK 3/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent CARROLLTON 75007 Texas Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for **V ✓** No ORIGINAL CREDITOR: 11 T Other. Specify **MOBILE** Yes T P Realty & Management Co 4.9 \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name 3500 S Union Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60609 State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify_ Is the claim subject to offset? **✓** No

Yes

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Dent Debtor 1 Shanique Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 TCF Bank \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 919 Estes Court Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60193 Schaumburg City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt NSF ✓ Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 University of Chicago Medical Center \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name 800 E. 55th St. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60615 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify _ Medical Bill **✓** No

Yes

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or 1 Shanique		N	Dent	Case number (if known)
First Name		Middle Name	Last Name	
3: List Othe	ers to Be Notifie	d About a Debt	That You Already Listed	
collection ager agency here. Si	ncy is trying to colle imilarly, if you have r	ct from you for a de	ebt you owe to someone else, list	hat you already listed in Parts 1 or 2. For example, if a the original creditor in Parts 1 or 2, then list the collecti listed in Parts 1 or 2, list the additional creditors here. I fill out or submit this page.
TMobile			On which entry in Part 1 o	r Part 2 did you list the original creditor?
Name			On which entry in Fart 1 o	Fait 2 did you list the original creditor?
P.O. Box 742596	6		Line 4.8 of (Che	Part 1: Creditors with Priority Unsecured Clain
Number Str	reet		one):	Part 2: Creditors with Nonpriority Unsecured Claims
Cincinnati	Ohio	45274	Last 4 digits of account n	umber 3418
City	State	Zip Code		
Arnold Scott Ha	arris PC			
Name			On which entry in Part 1 o	r Part 2 did you list the original creditor?
111 W Jackson	# 600		Line 4.1 of (Che	Part 1: Creditors with Priority Unsecured Claim
Number Str	reet		one):	Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	Illinois	60604	Last 4 digits of account n	umber
City	State	Zip Code		

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Shanique Dent Debtor 1 Case number (if known) Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$32,185.02 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$32,185.02 6j. Total. Add lines 6f through 6i. 6j.

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Fill in this information to identify your case:					
Debtor 1	Shanique	N	Dent		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing) First Name		Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
(State)					
Case number (If known)	_				

Official Form 106G

Check if this is ar
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company	with whom you have t	he contract or lease	State what the contract or lease is for
2.1	UNKNOWN, Zaneta Name			Residential Lease, Debtor is Lessee, Residential Lease for 7805 S Burnham
	7805 S Burnham Ave Number	Street		
	Chicago City	Illinois State	60649 Zip Code	

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Fill i	n this information to identify your cas	e:		
Deb	tor 1 Shanique	N	Dent	
	First Name	Middle Name	Last Name	_
	tor 2			
(Spo	ouse, if filing) First Name	Middle Name	Last Name	
Unit	ed States Bankruptcy Court for the:	Northern	District of Illinois (State)	_
	e number nown)			_
,	ficial Form 106H			Check if this is an amended filing
Sc	hedule H: Your Co	odebtors		12/15
Ansv 1. 2.	ver every question. Do you have any codebtors? (If you will you have any codebtors? (If you will you have any codebtors? (If you will you have you	bu are filing a joint case, do lived in a community projeco, Puerto Rico, Texas, Was	not list either spouse as a code perty state or territory? (Corshington, and Wisconsin.) we with you at the time?	nmunity property states and territories include Arizona, California,
	Yes. In which community s	state or territory did you live?	Fill in t	he name and current address of that person.
	Name of your spouse, for	ormer spouse, or legal equiv	ralent	_
	Number Street			_
	City	State	Zip Code	_
	again as a codebtor only if that pe	erson is a guarantor or co	signer. Make sure you have	ur spouse is filing with you. List the person shown in line 2 elisted the creditor on <i>Schedule D</i> (Official Form 106D), e D, <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in Abia	information to identif						
	information to identif						
Debtor 1	Shanique First Name	N Middle Name	Dent Last N	Jame	<u> </u>	-	
Debtor 2	i iist ivailie	Mildule Name	Lasti	varrie	•		Check if this is:
	ng) First Name	Middle Name	Last N	Name	;	_	An amended filing
United States	Bankruptcy Court for the:	Northern	District of II			_	A supplement showing post-petition chapter 1st expenses as of the following date:
Case number			(-	State)		·
(If known)							MM / DD / YYYY
Official	Form 106I						
3chedu	ule I: Your Ind	come					12/15
nclude info idditional	ormation about you	r spouse. If more spa ame and case numbe	ace is need	ed,	attach a s	eparate sh	ise is not filing with you, do not eet to this form. On the top of any
	II in your employment		Debtor	1			Debtor 2
in	formation.	Employment status	✓ Emplo	ved			Employed
lf y jol	you have more than one		Not E	-	/ed		Not Employed
att	o, tach a separate page with formation about additional	Occupation	Deck Han				
en	nployers.	Employer's name	Wendella	Sight	seeing Comp	any Inc	_
or	clude part time, seasonal, elf-employed work.	Employer's address	400 N Mic Number Str		n Ave		Number Street
O	ccupation may include						
	homemaker, if it applies.		Chicago		Illinois	60611	City State Zip Code
			City		State	Zip Code	State Zip Code
		How long employed there?	1 month				
Part 2: G	ive Details About	Monthly Income					
you are sepa If you or you	arated.						the space. Include your non-filing spouse unless on on the lines below. If you need more space,
a	a. a. 3 5 100 t 3 t 110 101111.				For D	ebtor 1	For Debtor 2 or non-filing spouse
		ry, and commissions (befor alculate what the monthly wag		2.		\$1,835.17	
3. Estima	ate and list monthly over	time pay.		3.		+ \$0.00	
4. Calcul	ate gross income. Add lin	ne 2 + line 3.		4.		\$1,835.17	

Official Form 106I Schedule I: Your Income page 1

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Debtor 1 Shanique N	Dent		Case number (if known)	
First Name Middle Name	Last Name		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	2	1.	\$1,835.17		
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	;	ā.	\$182.00		
5b. Mandatory contributions for retirement plans		īb.	\$0.00		
5c. Voluntary contributions for retirement plans		5c.	\$0.00		
5d. Required repayments of retirement fund loan		5d.	\$0.00		
5e. Insurance		5e.	\$0.00		
5f. Domestic support obligations		5f.	\$0.00		
5g. Union dues		5g.	\$0.00		
5h. Other deductions. Specify:		5h. +	\$0.00 +		
6. Add the payroll deductions. Add lines 5a + 5b + 5c +5h.		S.	\$182.00		
7. Calculate total monthly take-home pay. Subtract lin	e 6 from line 4.	7.	\$1,653.17		
8. List all other income regularly received:					
8a. Net income from rental property and from op business, profession, or farm Attach a statement for each property and business receipts, ordinary and necessary business expens monthly net income.	s showing gross es, and the total	3a.	\$300.00		
8b. Interest and dividends		Bb.	\$0.00		
8c. Family support payments that you, a non-filin dependent regularly receive Include alimony, spousal support, child support, madivorce settlement, and property settlement.	g spouse, or a	3c.	\$2.13		
8d. Unemployment compensation		3d.	\$0.00		
8e. Social Security		3e.	\$0.00		
8f. Other government assistance that you regular Include cash assistance and the value (if known) of assistance that you receive, such as food stamps (I the Supplemental Nutrition Assistance Program) of subsidies	any non-cash penefits under				
Specify: Food Assistance Programs Income		Bf.	\$419.00		
8g. Pension or retirement income		3g.	\$0.00		
8h. Other monthly income. Specify:		3h. +	\$0.00 +		
9. Add all other income Add lines 8a + 8b + 8c + 8d	8e + 8f +8g + 8h.	9.	\$721.13		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 o		10.	\$2,374.30	=	\$2,374.30
 State all other regular contributions to the exper Include contributions from an unmarried partner, memi relatives. Do not include any amounts already included in lines 2 	bers of your household, yo	ur depe	endents, your roommates	•	
Specify:	2-10 of amounts that are no	n avalle	ible to pay expenses liste	u III <i>30 ledale 3.</i> 11.	+ \$0.00
эреспу. ————————————————————————————————————					+
12. Add the amount in the last column of line 10 to t Write that amount on the Summary of Schedules and					\$2,374.30
13. Do you expect an increase or decrease within the	year after you file this fo	orm?			Combined monthly income
✓ No.					
Yes. Explain:					
l l					

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Fill in this inform	nation to identify y	our case:			
Debtor 1	Shanique	N	Dent		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	Check if this is:	
				An amended filing	,
United States B	Sankruptcy Court f	or the: Northern	District of Illinois (State)	A supplement sho expenses as of the	owing post-petition chapter 13 le following date:
Case number (If known)					J. C. C. G. C.
(II KIIOWII)				MM / DD / YYYY	,
Official I	Form 100	<u>6J</u>			
Schedul	e J: You	r Expenses			12/1
information. If r (if known). Ans	more space is ne wer every questi				
	cribe Your Ho	usehold			
1. Is this a join					
	to line 2				
Yes. Do	oes Debtor 2 live	in a separate household?			
	No				
	Yes. Debtor 2	must file Official Forms 106J-2, Expen-	ses for Separate Household of Debt	or 2.	
2. Do you have dependents?	e	No			
Do not list De Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
			Child	17 years	No.
			OUTL	40	✓ Yes. No.
			Child	16 years	Yes.
			Child	11 years	No.
					✓ Yes.
, , ,	enses include f people other	✓ No			
than		Yes			
yourself and dependents	-	_			
Part 2: Estir	mate Your On	going Monthly Expenses			
Estimate your	expenses as of of a date after the	your bankruptcy filing date unless to bankruptcy is filed. If this is a sup			
		n non-cash government assistance			Your expenses
		hip expenses for your residence. In	,		•
	r the ground or lot		s.s.s mor mongago paymonio and		\$850.00
If not incl	uded in line 4:				
4a. Real es	state taxes				4a \$0.00
	•	or renter's insurance			4b. \$0.00
	•	ir, and upkeep expenses			4c. \$0.00
4d. Homed	wner's association	n or condominium dues			4d. \$0.00

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Dent

Debtor 1

Shanique Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$150.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$70.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$700.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services \$140.00 10. 11. Medical and dental expenses \$39.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$50.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: __ \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Shanique		N	Dent	Case number (if known)	
	First Name		Middle Name	Last Name		
21.Other	. Specify:				21	\$0.00
22. Calcu	ılate your	monthly expenses.				\$2,199.00
22a. <i>A</i>	Add lines 4	through 21.				\$0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2						
22c. A	dd line 22a	a and 22b. The result	is your monthly expen	ises.	22.	
23.Calcu	late your	monthly net income).			
23a. C	Copy line 12	2 (your combined moi	nthly income) from Sc	hedule I.	23a	\$2,374.30
23b. C	Copy your n	nonthly expenses from	n line 22 above.		23b	\$2,199.00
23c. S	Subtract you	ur monthly expenses f	rom your monthly inco	ome.		\$175.30
	The result	is your monthly net in	come.		230	
24 Do vo	nu exnect	an increase or decr	ease in vour expens	ses within the year after yo	ou file this form?	
	•					
				n within the year or do you e modification to the terms of y		
		ioni to increase or ac	ordado bodadoo or a r	Trodination to the terms of y	odi mengage.	
~ ,	No					
□ \	⁄es					
	E	xplain here:				

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Fill in this information to identify your case:				
Debtor 1	Shanique	N	Dent	
ı	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) First Name		Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	Northern	District of Illinois	
Case number (If known)	(State)			

Official Form 106Dec

Check if this is an
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below									
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
	✓ No									
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).								
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	nd schedules filed with this declaration and								
~	•	×								
X	/s/ Shanique Dent Signature of Debtor 1	Signature of Debtor 2								
	Cig. Issue C. Dobio.	3.g. a.a. 5 3. 2 53.6. 2								
	Date <u>9/15/2016</u>	Date								
	MM/DD/YYYY	MM/DD/YYYY								

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4	Charim	A 1	5			
or 1	Shanique First Name	N Middle	Dent Name Last Nar	me e		
or 2	Thorramo	Middle	Lastria			
	ling) First Name	Middle	Name Last Nar	me		
d States	s Bankruptcy Court for the	: Northern	District of Illine	ois		
numbe	ar.		(Sta	ite)		
wn)	71 <u> </u>					
	Form 107	oiol Affoir	for lodivido	olo Filina for F) o r 4 o .	Check if this amended fil
				als Filing for E		
is need				al pages, write your name a		
ion.						
Giv	ve Details About Yo	ur Marital Stat	us and Where You Li	ved Before		
what	is your current marital	status?				
☐ N	Married					
✓ N	Not married					
Durin	on the leat 2 years, have	res lissed ensember	o othor then whom you live	- maur?		
During	g the last 3 years, have	you iived anywner	e otner than where you liv			
			•	C HOW:		
	No		•			
		u lived in the last 3 y	years. Do not include where			
		u lived in the last 3 y	•			
✓ Y		u lived in the last 3 y	•			Dates Debtor 2 live
✓ Y	es. List all of the places yo	u lived in the last 3 y	years. Do not include where	you live now.		Dates Debtor 2 live
✓ Y	es. List all of the places yo	u lived in the last 3 y	years. Do not include where y	you live now. Debtor 2:		there
D Ye	es. List all of the places yo	u lived in the last 3 y	years. Do not include where y	you live now.		there
D 83	es. List all of the places yo Debtor 1: 32 W Garfield Blvd	u lived in the last 3 y	years. Do not include where your Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1		there
D 83	es. List all of the places yo	u lived in the last 3 y	Dates Debtor 1 lived there From 08/2014	you live now. Debtor 2:		there Same as Debtor From
D 83 N	es. List all of the places you Debtor 1: 32 W Garfield Blvd Jumber Street		years. Do not include where your Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1		there Same as Debtor
D 88 N - C	res. List all of the places you below 1: 32 W Garfield Blvd Jumber Street Chicago Illinois	60609	Dates Debtor 1 lived there From 08/2014	Debtor 2: Same as Debtor 1 Number Street	7in Cult	there Same as Debtor From
D 88 N - C	es. List all of the places you Debtor 1: 32 W Garfield Blvd Jumber Street		Dates Debtor 1 lived there From 08/2014	Debtor 2: Same as Debtor 1 Number Street City State	Zip Code	there Same as Debtor From To
D 88 N - C	res. List all of the places you below 1: 32 W Garfield Blvd Jumber Street Chicago Illinois	60609	Dates Debtor 1 lived there From 08/2014	Debtor 2: Same as Debtor 1 Number Street	Zip Code	there Same as Debtor From To
Y	res. List all of the places you consider the places yo	60609	pyears. Do not include where your Dates Debtor 1 lived there From 08/2014 To 09/2016	Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	Zip Code	there Same as Debtor From To Same as Debtor
Y	res. List all of the places you below 1: 32 W Garfield Blvd Jumber Street Chicago Illinois	60609	Prom 08/2014 To 09/2016 From	Debtor 2: Same as Debtor 1 Number Street City State	Zip Code	there Same as Debtor From To Same as Debtor From From
Y	res. List all of the places you consider the places yo	60609	pyears. Do not include where your Dates Debtor 1 lived there From 08/2014 To 09/2016	Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	Zip Code	there Same as Debtor From To Same as Debtor
Y N S N C C C C C C C C C	res. List all of the places you consider the places yo	60609	Prom 08/2014 To 09/2016 From	Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	Zip Code	Same as Debtor From To Same as Debtor From

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debto	or 1 Shanique First Name	N Middle	Dent Name Last Nar		umber (if known)		
Dort C				ne			
Part 2	•						
F	Fill in the total amount of inc	ome you receive	d from all jobs and all busine		the two previous calendar y	ears?	
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	From January 1 of curre the date you filed for ba	ent year until	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$3794.25	Wages, commissions, bonuses, tips Operating a business		
	For last calendar year: (January 1 to December 3)	1, 2015 YYYY	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$15685.00	Wages, commissions, bonuses, tips Operating a business		
	For the calendar year be (January 1 to December 3)		✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$17856.00	Wages, commissions, bonuses, tips Operating a business		
In be ca	nclude income regardless of enefit payments; pensions; ase and you have income th	whether that inc rental income; in at you received t	terest; dividends; money collogether, list it only once unde	other income are alimony; chected from lawsuits; royalties;	ild support; Social Security, un and gambling and lottery win ted in line 4.		
	res. I ili ili ule details.		Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
	From Journal of	ant vess	Link	\$3,744.00			
	From January 1 of current the date you filed for base		Child Support Income	\$19.17			
			Unemployment Income	\$2,000.00			
	For last calendar year: (January 1 to December 3	31, <u>2015</u>) YYYY	Link Child Support Income	\$7,440.00 \$25.56			
	For the calendar year b	31, <u>2014</u>)	Link	\$7,440.00			
		YYYY	Child Support Income	\$25.56			

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	rst Name		Middle Name	Last Name	Case nui	inder (ii known)	
		Dovmoni			Pankruntav		
) LI	St Certain	Paymen	is fou Made b	sefore You Filed for	Банкгирісу		
re eith	ner Debtor 1	s or Debto	r 2's debts prima	rily consumer debts?			
No.			Debtor 2 has prir , family, or househo		Consumer debts are define	d in 11 U.S.C. § 101(8) as "inc	curred by an individual
	During the 9	90 days befo	ore you filed for bar	nkruptcy, did you pay any c	reditor a total of \$6,425* or r	nore?	
	No. Go	to line 7.					
	t	otal amount	you paid that credi	itor. Do not include payme	5* or more in one or more pa nts for domestic support obl to an attorney for this bankru	igations, such as	
	* Subject to	adjustment	on 4/01/19 and eve	ery 3 years after that for ca	ses filed on or after the date	of adjustment.	
Y es	s. Debtor 1 o	r Debtor 2	or both have prir	marily consumer debts.			
	During the 9	90 days befo	ore you filed for bar	nkruptcy, did you pay any c	reditor a total of \$600 or mo	re?	
	✓ No. Go	to line 7.					
	t	hat creditor.	Do not include pay		or more and the total amoun ort obligations, such as child his bankruptcy case.		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Cr	editor's Name	Э			_		Mortgage
Nu	ımber Street						Car Credit card
							Loan repayment
Cit	ty	State	Zip Code				Suppliers or vendors
							Other
Cr	editor's Name	9					Mortgage
Nu	ımber Street						Car Credit card
							Loan repayment
Cit	tv	State	Zip Code				Suppliers or vendors
O.	.9	Olalo	2.p 0000				Other
Cr	editor's Name	Э					☐ Mortgage
Nu	ımber Street						Credit card
							Loan repayment
Cit	ty	State	Zip Code				Suppliers or vendors
	-		•				Other

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Debto	or 1	Shanique First Name		N Middle Name	Dent Last I	t Name	Case number (if	known)
 (nsid corp ager	lers include your r orations of which	elatives; any g you are an offi or a business y	eneral partners; cer, director, per	relatives of any ge son in control, or c	eneral partners; part owner of 20% or mo	re of their voting seco	o was an insider? u are a general partner; urities; and any managing nestic support obligations,
	✓	No Yes. List all paym	ents to an insi	der.				
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
		Insider's Name						
		Number Street						
		City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				
i	nsid		lebts guarantee	ed or cosigned b		ayments or trans	fer any property on	account of a debt that benefited an
		, ,			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
								Include creditor's name
		Insider's Name						
		Number Street						
	_	City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				

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Deb	tor 1	Shanique First Name	N Middle Name	Dent Last Name	C	Case number (if	known)		
art	4:	Identify Legal A	Actions, Repossession	s, and Foreclosure	s				
	List a contr	all such matters, incluact disputes.	u filed for bankruptcy, were y Iding personal injury cases, sm						
	Ш	Yes. Fill in the details		ure of the case	Court or a	agency		Status of the case	
		Case title						Pending	
		Case number			Court Nan NumberSt			On appeal Concluded	
					O:t-	Chata	7in Codo		
		Case title			City	State	Zip Code	Pending	
		Case number			Court Nan			On appeal Concluded	
					NumberSt	reet		Concluded	
					City	State	Zip Code		
		No. Go to line 11. Yes. Fill in the infor	mation below.	Describe the prop	erty		Date	Value of the property	
		Creditor's Name		Explain what happ	ened				
		Number Street		Property was fo	Property was repossessed. Property was foreclosed. Property was garnished.				
		City	State Zip Code	Property was at Describe the prop		or levied.	Date	Value of the	
								property	
		Creditor's Name		Explain what happ	ened				
		Number Street		Property was re	reclosed. arnished.				
		City	State Zip Code	Property was at	tached, seized,	or levied.			

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Deb	tor 1	Shanique First Name	N Middle Name	Dent Last Name	Case number (if known)		
11.		hin 90 days before you filed for ounts or refuse to make a paym			ank or financial institution, s	set off any amoun	ts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account no	umber: XXXX-		
		City State	Zip Code				
12.		nin 1 year before you filed for b ointed receiver, a custodian, o		of your property in the p	oossession of an assignee f	or the benefit of c	reditors, a court-
	✓	No Yes					
Part	5:	List Certain Gifts and Co	ontributions				
13.	Wi	thin 2 years before you filed for	r bankruptcy, did yo	u give any gifts with a to	otal value of more than \$600	per person?	
	✓	No Yes. Fill in the details for each g	jift.				
		Gifts with a total value of mor per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the G	Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the G	Sift				
		Number Street					
		City State Person's relationship to you	Zip Code				

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Debt	tor 1	Shanique First Name	N Middle Name	Dent Last Name	Case number (if known)		
14.	Wit	hin 2 years before you filed for No Yes. Fill in the details for each		ou give any gifts or contril	butions with a total value of	more than \$600 t	o any charity?
		Gifts or contributions to ch that total more than \$600		Describe what you con	tributed	Date you contributed	Value
		Charity's Name					
		Number Street					
Part		City State List Certain Losses	Zip Code				
15.		hin 1 year before you filed for abling? No Yes. Fill in the details. Describe the property you to how the loss occurred		Describe any insurance Include the amount that in pending insurance claims A/B: Property.	e coverage for the loss nsurance has paid. List	Date of your loss	Value of property lost
Part	7:	List Certain Payments of	r Transfers				
16.	abo	hin 1 year before you filed for ut seeking bankruptcy or pre ude any attorneys, bankruptcy pe No	paring a bankruptcy	petition?			nyone you consulted
		Yes. Fill in the details.					
				Description and value of transferred	of any property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attorney's Fee - 350.00		9/12/2016	\$350.00
		Person Who Was Paid 20 South Clark Street 28th Flor Number Street	or				
		Chicago Illinois City State	60606 Zip Code				
		Email or website address					
		Person Who Made the Paymer	nt, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Paymer	nt. if Not You				

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Deb	tor 1	Shanique	N		ase number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for byou deal with your creditors not include any payment or trans No Yes. Fill in the details.	or to make payments		alf pay or transfer a	any property to any	one who promised to
	ш	res. I ill ill the details.		Description and value of any pro-	m a with a	Data	Amount of
				Description and value of any pro transferred	репту		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Oity Oldio	Zip Code				
	Inclu	ordinary course of your busing the both outright transfers and the sfers that you have already listed No Yes. Fill in the details.	ransfers made as secu	rity (such as the granting of a security			Do not include gifts and
				Description and value of any property transferred	Describe any payments re in exchange	ceived or debts pai	Date id transfer was made
		Person Who Received Transfe	er er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed ese are often called asset-protec		u transfer any property to a self-se	ettled trust or simil	ar device of which y	ou are a beneficiary?
		No Yes. Fill in the details.					
		. 55. Fill all distuits.		Description and value of the pro	operty transferred		Date transfer was made
		Name of trust					

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Debtor 1	Shanique First Name		N Middle Name	Dent Last Name	Case	number (if known)		
Oort O		ancial /		struments, Safe Deposi	· Boyos and	d Storago Units		
Part 8:	List Certain Fil	ianciai <i>i</i>	accounts, ins	struments, Sare Deposi	t boxes, and	a Storage Units		
mo Incl	ved, or transferred	l ? js, money r	narket, or other fir	ere any financial accounts or nancial accounts; certificates of tions.		-	-	
	No Yes. Fill in the deta	ils						
V	ics. I iii iii die deta			Last 4 digits of accoun number	t Type of instrun	faccount or nent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	TCF Bank Person Who Was F	Paid		_ XXXX-0000		ecking	08/2016	\$ 0.00
	919 Estes Court Number Street			-	Mo	ney market okerage		
	Schaumburg City	Illinois State	60193 Zip Code	_	Oth	ner		
	Person Who Was F	Paid		_ XXXX-		ecking vings		
	Number Street			_	Мо	ney market okerage		
	City	State	Zip Code	-	Oth	-		
	No Yes. Fill in the deta		e wallin i yea	before you filed for bankrupt Who else had access to i		Describe the conte	·	Do you still have it?
	Name of Financial	Institution		Name				No
	Number Street			Number Street				Yes
				City State	Zip Code			
	,	State	Zip Code					
2. Hav	ve you stored propose No Yes. Fill in the deta		orage unit or pla	ace other than your home wi	thin 1 year befo	ore you filed for bankr	uptcy?	
				Who else had access to i	1?	Describe the conte	ents	Do you still have it?
	Name of Storage	Facility		Name				☐ No ☐ Yes
	Number Street			Number Street	Zin O. d			
	City	State	Zip Code	City State	Zip Code			

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btor 1		De			e number (if known)	
	First Name Middle Name	Las	st Name			
t 9:	Identify Property You Hold or Cont	rol for Some	one Else			
	you hold or control any property that some neone.	one else owns?	' Include any	property you b	porrowed from, are storing for, or hold i	n trust for
301	neone.					
✓	No					
	Yes. Fill in the details.					
		Where is the	e property?		Describe the contents	Value
	Owner's Name	Number Stree	et			
	Number Street					
	Turnsor Street					
		City	State	Zip Code		
		- ,		,		
	City State Zip Code					
10:	Give Details About Environmental	Information				
the p	ourpose of Part 10, the following definitions apply	/ :				
• E	Environmental law means any federal, state, or lo	ocal statute or reg	gulation conce	erning pollution, c	contamination, releases of	
	nazardous or toxic substances, wastes, or materi	•		. •		
ir	ncluding statutes or regulations controlling the c	leanup of these s	substances, w	astes, or materia	al.	
- 5	Site means any location, facility, or property as de	fined under any e	environmental	law, whether you	now own, operate, or utilize it	
0	or used to own, operate, or utilize it, including dis	sposal sites.				
■ <i>F</i>	Hazardous material means anything an environm	ental law defines	as a hazardo	us waste, hazard	lous substance,	
	Hazardous material means anything an environmoxic substance, hazardous material, pollutant, co			us waste, hazard	lous substance,	
to	oxic substance, hazardous material, pollutant, co	ontaminant, or sin	nilar term.		lous substance,	
to		ontaminant, or sin	nilar term.		lous substance,	
to port a	oxic substance, hazardous material, pollutant, co	ontaminant, or sin	nilar term. dless of when	they occurred.		,
to port a	oxic substance, hazardous material, pollutant, co	ontaminant, or sin	nilar term. dless of when	they occurred.		,
to port a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn is any governmental unit notified you that you No	ontaminant, or sin	nilar term. dless of when	they occurred.		,
to oort a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn s any governmental unit notified you that yo	ontaminant, or sin	nilar term. dless of when	they occurred.		,
to oort a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn is any governmental unit notified you that you No	ontaminant, or sin	milar term. dless of when	they occurred.		Date of
to oort a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn is any governmental unit notified you that you No	ontaminant, or sin	milar term. dless of when	they occurred.	or in violation of an environmental law?	
to oort a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have not sany governmental unit notified you that you have not have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you have not sany governmental unit not governmental unit	ontaminant, or sin	milar term. dless of when or potential	they occurred.	or in violation of an environmental law?	Date of
to oort a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn is any governmental unit notified you that you No	ontaminant, or sin	milar term. dless of when or potential	they occurred.	or in violation of an environmental law?	Date of
to oort a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have not sany governmental unit notified you that you have not have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you that you have not sany governmental unit notified you have not sany governmental unit not governmental unit	ontaminant, or sin	milar term. dless of when or potential dtal unit	they occurred.	or in violation of an environmental law?	Date of
to ort a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have not seen	Governmenta Number Stree	milar term. dless of when or potential atal unit al unit	they occurred.	or in violation of an environmental law?	Date of
to oort a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have not seen	ontaminant, or sin	milar term. dless of when or potential dtal unit	they occurred.	or in violation of an environmental law?	Date of
to oort a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have not not notified you that you have not	Governmenta Number Stree	milar term. dless of when or potential atal unit al unit	they occurred.	or in violation of an environmental law?	Date of
to port a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have not seen	Governmenta Number Stree	milar term. dless of when or potential atal unit al unit	they occurred.	or in violation of an environmental law?	Date of
to	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have not not notified you that you have not	Governmenta Number Stree	milar term. dless of when or potential atal unit at unit et	they occurred. Iy liable under o	or in violation of an environmental law?	Date of
to	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know any governmental unit notified you that you have some any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any	Governmenta Number Stree	milar term. dless of when or potential atal unit at unit et	they occurred. Iy liable under o	or in violation of an environmental law?	Date of
to	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No	Governmenta Number Stree	milar term. dless of when or potential atal unit at unit et	they occurred. Iy liable under o	or in violation of an environmental law?	Date of
to port a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know any governmental unit notified you that you have some any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any	Governmenta Rowerstreet Governmenta Number Street City y release of haza	milar term. dless of when e or potential stal unit al unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to port a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No	Governmenta Number Stree	milar term. dless of when e or potential stal unit al unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to the point a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No	Governmenta Rowerstreet Governmenta Number Street City y release of haza	milar term. dless of when e or potential stal unit al unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to port a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have some any governmental unit notified you that you have yes. Fill in the details. No No No No No State Zip Code Ve you notified any governmental unit of any No Yes. Fill in the details.	Government City Government Government City Government	milar term. dless of when e or potential datal unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to port a	oxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No	Governmenta Rowerstreet Governmenta Number Street City y release of haza	milar term. dless of when e or potential datal unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to port a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have some any governmental unit notified you that you have yes. Fill in the details. No No No No No State Zip Code Ve you notified any governmental unit of any No Yes. Fill in the details.	Government City Government Government City Government	milar term. dless of when e or potential ntal unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No Yes. Fill in the details. Name of site	Government Government Governmenta Number Street City Governmenta	milar term. dless of when e or potential ntal unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No Yes. Fill in the details. Name of site	Government Government Governmenta Number Street City Governmenta	milar term. dless of when e or potential ntal unit et State ardous mate	they occurred. Iy liable under o	or in violation of an environmental law?	Date of notice
to port a	oxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any No Yes. Fill in the details. Name of site	Governmenta Governmenta Governmenta City Governmenta Governmenta Number Street Governmenta Number Street	nilar term. Idless of when or potential atal unit et State ardous mate atal unit et unit	zip Code	or in violation of an environmental law?	Date of notice

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Deb	tor 1	Shanique		N	Dent	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e vou been a partv	in anv iudic	al or administ	rative proceeding under	anv environmenta	I law? Include settlements and order	s.
			,,		.	, , , , , , , , , , , , , , , , , , , ,		
	뇓	No						
	Ш	Yes. Fill in the detai	ils.					
					Court or agency		Nature of the case	Status of the
		Case title						case
		Case title						Pending
				_	Court Name			
		Coco number			Number Street			On appeal
		Case number			Number Officet			Concluded
					City State	Zip Code		
					•	·		
Part	:11:	Give Details A	bout Your	Business o	r Connections to Ar	ny Business		
~	1854		(!!! (h	Handing a superior of the same hands and	• •
27.	vviti	nin 4 years before	you filed for	bankruptcy, di	d you own a business or	nave any of the fo	llowing connections to any business	57
		✓ A sole propriet	or or self-emp	loyed in a trade	e, profession, or other activit	y, either full-time or	part-time	
		A member of a	limited liabilit	y company (LLC	C) or limited liability partner	ship (LLP)		
		A partner in a p	oartnership					
		An officer, direct	ctor, or manaç	ging executive o	of a corporation			
		An owner of at	least 5% of th	e voting or equ	ity securities of a corporation	n		
	П	No. None of the abo	wo applies G	to Dort 12				
	片				ails below for each business			
	¥	res. Oricon all triat t	apply above al	ia iii ii ii ii ii c acie		· ıre of the business	Employer Identification n	umber De not
					Describe the nati	ire of the business	include Social Security n	
		Dent, Shanique N			Self Employed Ha	air Styliet		
		Business Name			Sell Employed Ha	ali Stylist	EIN:xx-xxx	
		7805 S Burnham A	ve FI 2					
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		Chicago	Illinois	60649	Name of account	ant or bookkeeper	Dates Busilless existed	
		City	State	Zip Code	Self		From 09/2010 To 09/20	016
							110111 03/2010 10 03/20	010_
					Describe the natu	re of the business		
							include Social Security no	umber or ITIN.
							EIN:	
		Business Name						
		Number Street					Dates business existed	
		Number Street			Name of account	ant or bookkeeper	•	
		City	State	Zip Code			From To	
		City	State	Zip Code				
					Describe the natu	re of the business	Employer Identification n include Social Security no	
								uniber of frin.
		Business Name			-		EIN:	
		2401100011401110						
		Number Street					Dates business existed	
					Name of account	ant or bookkeeper		
		City	State	Zip Code			From To	
		•		,				

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Deb	otor 1	Shanique	N	Dent	Case number (if known)
		First Name	Middle Name	Last Name	
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.				
	✓	No Yes. Fill in the details below.			
				Date issued	
		Name		MM/DD/YYYY	
		Name		WIW, DD, TTTT	
		Number Street		=	
				_	
		City State	Zip Code		
Par	t 12:	Sign Below			
	I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		/s/ Shanique D)ent		x
		Signature of Debte	or 1		Signature of Debtor 2
		Date 9/15/2016			Date
	Did v	ou attach additional nages t	o Vour Statement of I	Financial Affairs for Indivi	duals Filing for Bankruntcy (Official Form 107)?
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?					duals I ming for Bankruptoy (Official Form 107):
		, ,			
	ЦY	⁄es			
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				pankruptcy forms?	
	✓ N	No.			
	<u> </u>	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,
					Declaration, and Signature (Official Form 119)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+ \$75		administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Shanique N Dent	Case No.			
_	Debtor		(If known)		
		Chapter	Chapter 13		
	DISCLOSURE OF COMPENSATI	ON OF ATTORNEY FOR	DEBTOR		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) that compensation paid to me within one year before the f services rendered or to be rendered on behalf of the debto is as follows:	iling of the petition in bankruptcy, or agre	eed to be paid to me, for		
	For legal services, I have agreed to accept		\$4,000.0		
	Prior to the filing of this statement I have received		\$350.00		
	Balance Due		\$3,650.00		
2.	The source of the compensation paid to me was:				
	Debtor Other (spe	ecify)			
3.	The source of the compensation paid to me is:				
	Debtor Other (spe	ecify)			
4.	I have not agreed to share the above-disclosed components and associates of my law firm.	ensation with any other person unless th	ey are		
	I have agreed to share the above-disclosed compensa members or associates of my law firm. A copy of the the people sharing in the compensation, is attached.				
5.	In return for the above-disclosed fee, I have agreed to rer a. Analysis of the debtor's financial situation, and rend bankruptcy;				
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;				
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;				
	d. Representation of the debtor in adversary proceed	ings and other contested bankruptcy ma	tters;		
6.	By agreement with the debtor(s), the above-disclosed fee	does not include the following services:			
	CERTI	FICATION			
	certify that the foregoing is a complete statement of any a see debtor(s) in this bankruptcy proceedings.	greement or arrangement for payment t	o me for representation		
	9/15/2016	/s/ Ryan Crotty			
_	Date	Signature of Attorney			
		Semrad Law Firm			
		Name of law firm	-		

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Dent, Shanique N	Case No		
_	Debtor(s)			
		Chapter.	Chapter13	-
	VERIFICAT	TION OF CREDITOR MATRI	X	
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowled			lge
Date:	9/15/2016	/s/ Dent, Shanique N		
	3.13.2010	Dent, Shanique N Signature of Debtor		-

SW CRDT SYS 2629 DICKERSON PK CARROLLTON , TX 75007 USA

TMobile P.O. Box 742596 Cincinnati , OH 45274 USA

Midwest Title Loans- Pulaski 3751 W 79th St Chicago , IL 60652 USA

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace , IL 60181 USA

Peoples Gas 200 E. Randolph Chicago , IL 60601 USA

Illinois Tollway PO Box 5544 Chicago , IL 60680 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

Arnold Scott Harris PC 111 W Jackson # 600 Chicago , IL 60604 USA

T P Realty & Management Co 3500 S Union Ave Chicago , IL 60609 USA

TCF Bank 919 Estes Court Schaumburg , IL 60193 USA

Speedy Cash (Corporate Office) 3527 N Ridge Rd Wichita , KS 67205 USA

University of Chicago Medical Center 800 E. 55th St.

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Chicago , IL 60615 USA IDES P O Box 4385 Benefit Payment Control Division Chicago , IL 60680 USA

Enterprise Rent-A-Car Damage Recovery Unit Po Box 801988 Kansas City , MO 64180 USA